



HOSPITAL EMERGENCY SERVICES REDUCTION IMPACT ASSESSMENT

Effective: March 13, 2018
Replaces: September 12, 2014
Review: March 13, 2021

I. Purpose

The purpose of this policy is to establish the criteria for performing an impact evaluation of a hospital's planned reduction or elimination of emergency medical services.

Hospitals with a basic or comprehensive emergency department certificate provide a unique service and an important link to the community in which they are located and the reduction or elimination of those services may have a profound impact on the emergency medical services available in their area and to the community at large.

II. Evaluation Process

- A. Upon receiving notification of a planned reduction or elimination of emergency medical services by a hospital or the California Department of Health Services, the Agency will notify the Board of Supervisors, Santa Clara County Public Health Department, all local hospitals, fire departments, ambulance providers, and all local planning and/or zoning authorities.
- B. Within thirty (30) days of reduction/elimination notification, the Agency, in consultation with emergency service providers and planning/zoning authorities, will complete and distribute a draft EMS Impact Evaluation utilizing the Impact Evaluation Instrument.
- C. Within forty-five (45) days of reduction/elimination notification, the Agency will conduct at least one (1) public hearing, and incorporate the results of the hearing(s) in the final Impact Evaluation. The public hearing(s) may be incorporated with other public meetings held by the Health and Hospital Joint Conference Committee, the Board of Supervisors, and/or other government agencies, commissions, or committees.
- D. Within sixty (60) days of receiving reduction/elimination notice, and not more than three (3) days after completing the Impact Evaluation, the Agency will prepare the final Impact Evaluation and submit those findings to the California Department of Health Services, the Board of Supervisors, all city councils, fire departments, ambulance services, hospitals, planning/zoning authorities, affected committees and commissions, and other interested parties.

III. Evaluation Content

- A. At a minimum, the Impact Evaluation shall contain the following:
 - 1. Assessments of community access to emergency medical care, including proximity of other facilities
 - 2. The effect on emergency services provided by other entities, including any changes in the number of licensed and staffed beds, and/or additional resource requirements
 - 3. The impact on the local EMS system, including patient transport time, resource utilization, operational procedures, and patient care practices
 - 4. Strategies taken or planned by the emergency services community for accommodating the reduction or loss of emergency services
 - 5. Public and emergency service provider comments
 - 6. Potential options to reduce the anticipated impact, if known